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PTO/SB/01 (03-01)
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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing
OR
☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number

First Named Inventor

Catherine PRIMARD-BRISSET

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am an original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**METHOD OF PRODUCING DOUBLE LOW RESTORER LINES OF BRASSICA NAPUS
HAVING A GOOD AGRONOMIC VALUE**

(Title of the Invention)

the specification of which

☐ is attached hereto
OR

☒ was filed on (MM/DD/YYYY) 07/05/2004 as United States Application Number or PCT International

Application No. PCT/IB2004/002491 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
03291677.7	EUROPE	07/04/2003	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
03293057.0	EUROPE	12/08/2003	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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	First Named Inventor	Catherine PRIMARD-BRISSET
	COMPLETE IF KNOWN	
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	Filing Date	
	Group Art Unit	
	Examiner Name	

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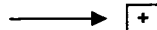
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				YES	NO
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03293057.0	EUROP	12/08/2003	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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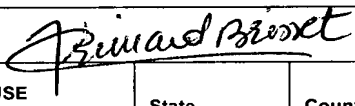
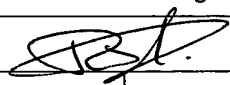
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DECLARATION — Utility or Design Patent Application

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number 000530

Direct all correspondence to:		<input checked="" type="checkbox"/> Customer Number or Bar Code Label	000530	OR <input type="checkbox"/> Correspondence address below
Name				
Address				
City		State		ZIP
Country	Telephone		Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.				
NAME OF SOLE OR FIRST INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Catherine			Family Name or Surname PRIMARD-BRISSET	
Inventor's Signature 			Date 20.12.2005	
Residence: City : SAINT REMY LES CHEVREUSE		State	Country: FRANCE	Citizenship : French
Mailing Address:	119, rue de Paris, 78470 SAINT REMY LES CHEVREUSE - FRANCE			
City : SAINT REMY LES CHEVREUSE		State	ZIP 78470	Country : FRANCE
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Régine			Family Name or Surname DELOURME	
Inventor's Signature 			Date 09-12-2005	
Residence: City : L'HERMITAGE		State	Country : FRANCE	Citizenship : French
Mailing Address:	36, rue de Rennes, 35590 L'HERMITAGE - FRANCE			
City : L'HERMITAGE		State	ZIP 35590	Country : FRANCE
<input checked="" type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.				

LD-537A

DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet		Page 3 of 4
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))		Family Name or Surname		
Jean-Pierre		POUPARD		
Inventor's Signature		Date		
Residence: City : VERSAILLES	State	Country	Citizenship : French	
Mailing Address:		c/o SGAP INRA, Centre de Versailles, Route de Saint Cyr 78026 VERSAILLES - FRANCE		
City : VERSAILLES	State	ZIP : 78026	Country : France	

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))		Family Name or Surname		
Raymonde		HORVAIS		
Inventor's Signature <i>Horvais</i>		Date 09.12.2005		
Residence: City MONTREUIL-SUR-ILLE	State	Country : FRANCE	Citizenship : French	
Mailing Address:		La Poterie, DINGE 35440 MONTREUIL-SUR-ILLE - FRANCE		
City MONTREUIL-SUR-ILLE	State	Zip 35440	Country FRANCE	

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))		Family Name or Surname		
Françoise		BUDAR		
Inventor's Signature <i>[Signature]</i>		Date 07.01.2006		
Residence: City LES MOLIERES	State	Country FRANCE	Citizenship French	
Mailing Address:		52, rue de Gometz 91470 LES MOLIERES - FRANCE		
City LES MOLIERES	State	Zip 91470	Country FRANCE	

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))		Family Name or Surname		
Georges		PELLETIER		
Inventor's Signature <i>[Signature]</i>		Date 07.01.06		
Residence: City BURES SUR YVETTE	State	Country FRANCE	Citizenship	
Mailing Address:		28, avenue de l'Espérance, 91440 BURES SUR YVETTE - FRANCE		
City BURES SUR YVETTE	State	Zip 91440	Country FRANCE	

DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Michel		RENARD	
Inventor's Signature		Date 12.03.05	
Residence: City : LE RHEU	State	Country FRANCE	Citizenship : French
Mailing Address:	9, avenue du Stade, 35650 LE RHEU - FRANCE		
City : LE RHEU	State	Zip : 35650	Country : FRANCE

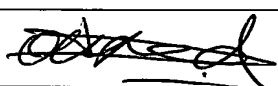

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City MONTREUIL-SUR-ILLE	State	Country : FRANCE	Citizenship : French
Mailing Address:			
City	State	Zip	Country

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address:			
	State	Zip	Country

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address:			
City	State	Zip	Country

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Nicolas Pierre		POUPARD	
Mr. Jean-Pierre POUPARD 's heir, (deceased)			
Inventor's Signature 		Date <u>12/06/2006</u>	
Residence: City: CHILLY-MAZARIN	State	Country FRANCE	Citizenship: French
Mailing Address:	36, rue Pierre Brossolette		
CHILLY MAZARIN	State	Zip: 91380	Country: FRANCE
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Marion Hélène		POUPARD	
Mr. Jean-Pierre POUPARD 's heiress, (deceased)			
Inventor's Signature 		Date <u>12/06/2006</u>	
Residence: City LONGJUMEAU	State	Country FRANCE	Citizenship French
Mailing Address:	15, ruelle de la Haute Montée		
City LONGJUMEAU	State	Zip 91160	Country FRANCE